

## Exemption §106.224 Checklist (Previously Standard Exemption 123)

## **Aerospace Equipment and Parts Manufacturing**

The following checklist has been developed by the Texas Commission on Environmental Quality (TCEQ) to provide verification that the basic requirements of Exemption §106.224, previously Standard Exemption 123, are met. The questions below are derived from §106.4 and the TCEQ exemption list. Please read all of the questions and check each answer YES or NO, or provide specific information as applicable to the facility. Total plant site emissions cannot exceed 25 tons per year. If all conditions of a specific exemption are not met, the facility will not be allowed to operate under exemption and an application for a construction permit will be required pursuant to §116.110 prior to construction.

Please provide the information requested below and complete the applicable parts of the checklist that apply to the proposed operation.

Faci	lity Type	e:							-		
Ope	rating Sc	hedule:	hour	rs/day	, days/week	, weeks	/year				
Prod	uction R	ate (# ur	nits/time	e):							
	<u>YES</u>	<u>NO</u>	Descri	iption							
a)			Emiss	ion points are	e located at least 10	0 feet from	any off-plai	nt recept	cor*.		
	*	the ow	ner or o	perator of the e aerospace p	ny recreational area e aerospace equipme lant is located. Con the aerospace plant	ent and part strolled acco	s manufactu ess recreatio	ring pla nal area	nt or the ov	vner of the p	roperty
b)	List the increase in the emissions of the following air contaminants authorized under this exemption, on a cumulative basis, from the entire aerospace manufacturing plant:							ıulative			
			1)	Particulate	matter			_tpy (<	5 tpy)		
			2)	VOC				_tpy (<	15 tpy)		
			3)	Acid gases	or vapors			_tpy (<	5 tpy)		
			4)	Nonvolatile	e hydrocarbons			_tpy (<	10 tpy)		
			5)	Total of <u>all</u>	air contaminants			_tpy (<	25 tpy)		
			The	increases are	less than the limits	shown in p	parenthesis.				

c)		defined by the e	as of total new or increased emissions variation E=L/K. The compound specific Standard Exemption 118. Values of K are the value(s) of E or complete the follows:	e values of L (mg/m³) are listed in Table e listed in Table 123A of this exemption.
d)		PI-7, before co	be registered with the TCEQ central officenstruction of the facility is begun. To ssions calculations, and a description of	This registration will include a project
e)		and shall be the	will include all process emission sources maximum allowed emissions for permitter exempted units, and the projected max	ed units, the actual emissions for existing
f)			be speciated by chemical compound and tource shall be provided.	the stack parameters, as appropriate, for
		Compound	Distance (ft) **	Proposed Emission Rate (lb/hr)
		•	FOR ALL CHEMICALS AND ALL EMISSION from emission point to nearest off-plants	•
g)			nventory will be compiled and/or updates on the property, and be maintained	<u>-</u>
	Note:		lld include the basis for all emissions . Material and solvent usage record npliance.	
h)		There are/will	be no visible emissions from this fac	ility.
i)	——Chem	compressed ga an aqueous sol ical List: Acrole	ill handle or store any of the chems in a compound mixture of a concent ution of any of these same chemicals in, Ammonia, Bromine, Carbon Disgen Chloride, Hydrogen Bromide	ration greater than 10% by weight or greater than 50% by weight. <b>ulfide, Chlorine, Ethyl Mercaptan,</b>

## Fluoride, Hydrogen Sulfide, Phosphine, SO<sub>2</sub>, Methyl Bromide, Methyl Isocyanate, Methyl Mercaptan, Nickel Carbonyl, and Phosgene.

If YES, answer the following:

(1)	The facility shall be located at least 300 feet from the nearest property line and 600 feet from any off-plant receptor.
(2)	The cumulative amount of any one of the above listed chemicals resulting from one or more authorizations under this exemption, shall not exceed 500 pounds on the plant property.
(3)	Any chemical in the list above shall be handled, contained and transported, in compliance with U.S. Department of Transportation regulations (49 CFR Parts 171 through 178).
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Name:	Company:
Title:	Facility Name:
Phone#: ()	Account ID#:
FAX#: ()	Location:
Signature of Company Of	ficer Date